Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1)						mn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			1 - 2			4. 4. 4. 4. 4. 4. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.		RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2 3minus 20=		. 3			X\$ 9=		OR	X\$18=	34
INDEPENDENT CLAIMS			√ minus 3 =		* /			X40=		OR	X80=	88
ML	ILTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	"0" in column 2		TOTAL		OR	TOTAL	844
	С	LAIMS AS A	MENDED - PART II								OTHER THAN	
		(Column 1)		(Colu		(Column 3)		SMALL E		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	· · · ·	=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	T CLAIM	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
							ΔΓ	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	i bare es	NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL A114	<u> -</u>		X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF MU	JLIIPLE DEP	ENDEN	I CLAIN		'	+135=		OR	+270=	
							ΔΓ	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3))			7,00(1.122)	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AINA	=	$I \Gamma$	X40=		OR	X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						'	+135=	<u></u>	OR	+270=	
*	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." 								_	OR	TOTAL	
***	If the "Highest Nu	mber Previously Pather Previously Pa	aid For" IN THI	S SPACE	is less tha	an 3, enter "3."	,,,_	DDIT. FEE	propriate bo	•	ADDIT. FEE dumn 1.	